Application or Docket Number

Effective October 1, 2003 \7755 635												35
						umn 2)		NTITY OR		OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			1.24				RAT	E	FEE	7	RATE	FEE
FOR			NUMBE	NUMBEA FILED		NUMBER EXTRA		EE	385.00	OR	BASIC FEE	770.Q0
Ţ	OTAL CHARGE	₩ minus 20=		* V		X\$ 9	=		OR	X\$18=	72	
ĺΝ	DEPENDENT (\mathcal{U} minus 3 =		*		X43:	_		OR	X86=		
М	ULTIPLE DEPE	NDENT CLAIM P	RESENT				+145	_		OR	+290=	
* If the difference in column 1 is less than zero					"0" in (column 2	TOTA	L	:	OR	TOTAL	842
	CLAIMS AS AMENDED - PART II									1.	OTHER	
	· · · · · · · · · · · · · · · · · · ·	(Column 1)	·	(Colun		SMALI			OR	SMALL		
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID E	BER JUSLY	PRESENT EXTRA	RATE		ADDI- FEE_		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	**		= .	X\$ 9=	=		OR	X\$18=	
AME	Independent	*	Minus	***	<u> </u>	=	X43=			OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145=			OR	+290=	
							TOT. ADDIT. FE			OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	nn 2)	(Column 3)						
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		±.	X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		=	X43=			OR	X86=	,
لـــــ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL				CLAIM		+1'45=			OR	+290=	_
							TOTA ADDIT. FE				TOTAL ADDIT. FEE	
		(Column 1)		(Colum	n 2)	(Column 3)	ADDIT. FE	.C. L		,	ADDII. FEEL	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMBI PREVIOU PAID F	ST ER JSLY	PRESENT EXTRA	RATE	TI	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .	X\$ 9=			OR	X\$18=	
ME.	Independent		Minus	***		=	X43=	1		OR	X86=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEF	PENDENT (CLAIM			+		UH I		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										+290=		
*** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pai her Previously Paid					ound in the a	pproc	oriate box	in colu	mn 1.	